APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY FOR CANDIDATES

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

NOTE: This form must be on file with the qualifying

| officer before opening the campaign account. | | | | | OFFICE USE ONLY | | | | | | | |
|--|--------------------------|--------------------|---------|-------------------|---|---------|--------------|-----------|-------------|--------|-------|--|
| 1. CHECK APPROPRIATE | | | _ | | DEC | 920 1:2 | epm | | | | | |
| Initial Filing of Form | Re | -filing to Change | : 🔲 1 | Γreas | urer/Deputy | | Deposito | | | | Party | |
| 2. Name of Candidate (in this order: First, Middle, Last) | | | | | 3. Address (include post office box or street, city, state, zip | | | | | | | |
| Bryan Calvo | | | | | code) 4250 W 19 Ave | | | | | | | |
| 4. Telephone | ephone 5. E-mail address | | | Hialeah, FL 33012 | | | | | | | | |
| (786) 566-1149 | bryan@bryancalvo.com | | | | | | | | | | | |
| 6. Office sought (include district, circuit, group number) | | | | | 7. If a candidate for a <u>nonpartisan</u> office, check if | | | | | | | |
| City Council Group #7 | | | | | applicable: My intent is to run as a Write-In candidate. | | | | | | | |
| 8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a | | | | | | | | | | | | |
| Write-In No | | Party candidate. | | | | | | | | | | |
| 9. I have appointed the following person to act as my | | | | | | | | | | | | |
| 10. Name of Treasurer or Deputy Treasurer | | | | | | | | | | | | |
| Bryan Calvo | | | | | | | | | | | | |
| 11. Mailing Address | | | | | 12. Telephone | | | | | | | |
| 4250 W 19 Ave | | | | | | | | (786 |) 566-11 | 49 | | |
| 13. City | | | | | • | | | | | | | |
| Hialeah Dade FL | | | | | 33012 bryan@bryancalvo.com | | | | | | | |
| 18. I have designated the | X F | | | | | | | | | | | |
| 19. Name of Bank | | | | | 20. Address | | | | | | | |
| Apollo Bank | | | | | 1255 W 49 St | | | | | | | |
| 21. City | | 22. County | | | 23. S | tate | | | 24. Zip C | ode | | |
| Hialeah | | Dade | | | FL | | | | 33012 | | | |
| UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE. | | | | | | | | | | | | |
| 25. Date | | | | | 26. Signature of Candidate | | | | | | | |
| 12/09/2020 | | | | | X Buzan Calvo. | | | | | | | |
| 27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block) | | | | | | | | | | | | |
| ı,Bryan Calvo | | | | | | | , do her | eby accep | ot the appo | intmen | t . | |
| | (Pleas | se Print or Type N | Name) | | | | _ | - | | | | |
| designated above as: | X | Campaign T | reasure | r | Deput | y Tre | easurer. | | | | | |
| 12/09/2020 X | | | | / Sugar Calso | | | | | | | | |
| Date | | | | | Signature of Campaign Treasurer or Deputy Treasurer | | | | | | | |